PART B - FEE(S) TRANSMITTAL

· Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress)				Note: A certificate of mailing can only be used for domestic mailings of the Fcc(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
			hav	e its own certificate of	f mailing or transmission.	ent or tormal drawing, must	
2292	7590 06/11		•	Certificate of Mailing or Transmission			
	ART KOLASCH	& BIRCH, LLF	I he	I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
PO BOX 747			Sta add	les Postal Service with ressed to the Mail S	h sufficient postage for fill top ISSUE FEE address	rst class mail in an envelope	
FALLS CHURC	H, VA 22040-0747	PE 4001	trar	smitted to the USPTC	(571) 273-2885, on the	date indicated below.	
	/	(O)	.\			(Depositor's name)	
	1	30 Jan. 8	2			(Signature)	
		AUG 3 0 2007 4				(Date)	
APPLICATION NO.	FILING DATE	\7\	FIRST NAMED INVENTOR	\	TTORNEY DOCKET NO.	CONFIRMATION NO.	
10/089,235 TITLE OF INVENTION:	VIDE d ^{03/28/2002} MAGE REPRODUCI	EROIPMEN	T Shigeru Nagata	•	1163-0400P	4565	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	FEE TOTAL FEE(S) DUI	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700 (2007 OHDNOC2 0000	09/11/2007 8882 822448 18889235	
EXAMINER		ART UNIT	CLASS-SUBCLASS	08/31/2007 AWONDAF2 00000082 022448 10089235 01 FC:1501 1400.00 DA			
DESIR, JEAN WICEL		2622	348-836000	02 FC	:1504 300.00	I DA	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 Kolasch & Birch, LL)				
"Fee Address" indi	cation (or "Fee Address"		(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AN	D RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)			
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIG	NEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Mitsubish	i Denki		_				
Kabushik	i Kaisha		Tokyo, Jap				
Please check the appropris	ate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🖾 Corp	oration or other private g	roup entity Government	
4. The following for(s) o	automissadı	Al	Doument of Cos(s): (Blo	(l l			
4a. The following fec(s) a Since Fee	ie saominea.	71	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies (Four) 4			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any				
			overpayment, to Deposit Account Number 02-2448 (enclose an extra copy of this form).				
5. Change in Entity Stat	us (from status indicate	d above)					
a. Applicant claims	SMALL ENTITY state	IS. Sec 37 CFR 1.27.	b. Applicant is no lor	ger claiming SMALL	. ENTITY status. See 37 (CFR 1.27(g)(2).	
NOTE: The Issue Fee and interest as shown by the re	Publication For (if requestroids of the United Sta	uired) will not be accepte ites Patent and Trademark	d from anyone other than office.	the applicant; a registe	cred attorney or agent; or	the assignee or other party in	
Authorized Signature	A THO	to al	WILLIAM TI	COMP Augu	ıst 30, 2007	·	
Typed or printed name D. Richard Anderson Registration No. 40							
This collection of informs an application. Confident submitting the completed this form and/or suggestion 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 Ciality is governed by 35 application form to the ons for reducing this buinginia 22313-1450. DCi3-1450.	CFR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR	on is required to obtain or 1.14. This collection is es depending upon the indi the Chief Information Offic COMPLETED FORMS T	retain a benefit by the stimated to take 12 mi vidual case. Any com cr, U.S. Patent and Tr O THIS ADDRESS.	public which is to file (at nutes to complete, includ- ments on the amount of t ademark Office, U.S. De SEND TO: Commissione	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.